

**Fill in this information to identify the case:**

Debtor ASTA Therapy Services, LLC

United States Bankruptcy Court for the Northern District of Illinois

Case number \_\_\_\_\_  
(If known)

Check if this is:  
☐ An amended filing

Chapter you are filing under:  
☒ Chapter 7  
☐ Chapter 9  
☐ Chapter 11  
☐ Chapter 12

**Official Form 201**

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name ASTA Therapy Services, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 32-0050881

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

134 North McLean Blvd.

Number Street

P.O. Box 5056

Number Street

Elgin IL 60123

City, State, ZIP Code

Elgin IL 60121-5056

City, State, ZIP Code

Location of principal assets, if different from principal place of business

Kane

County

N/A

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other: Specify N/A

7. Describe debtor's business

A. Check one:

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☐ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.naics.com/search>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7  
☐ Chapter 9  
☐ Chapter 11. Check all that apply:  
☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925.00 (amount subject to adjustment on (04/13) and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.  
☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes District N/A When                      Case number                       
MM/DD/YYYY

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☐ No

☒ Yes Debtor ASTA Care Center of Elgin Relationship                     

District N.D/ of Illinois When 12/28/2015 Case number                       
MM/DD/YYYY

11. Why is the case filed in this district?

Check all that apply:

- ☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☒ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention.

Part 2: Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000 - 5,000   | <input type="checkbox"/> 25,001 - 50,000   |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001 - 10,000  | <input type="checkbox"/> 50,001 - 100,000  |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001 - 25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

15. Estimated assets

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$1,000,001 to \$10 million    | <input type="checkbox"/> \$500,000,001 to \$1 billion     |
| <input type="checkbox"/> \$50,001 to \$100,000      | <input type="checkbox"/> \$10,000,001 to \$50 million   | <input type="checkbox"/> \$1,000,000,001 to \$10 billion  |
| <input type="checkbox"/> \$100,001 to \$500,000     | <input type="checkbox"/> \$50,000,001 to \$100 million  | <input type="checkbox"/> \$10,000,000,001 to \$50 billion |
| <input type="checkbox"/> \$500,001 to \$1 million   | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> More than \$50 billion           |

16. Estimated liabilities

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> \$0 to \$50,000                   | <input type="checkbox"/> \$1,000,001 to \$10 million    | <input type="checkbox"/> \$500,000,001 to \$1 billion     |
| <input type="checkbox"/> \$50,001 to \$100,000             | <input type="checkbox"/> \$10,000,001 to \$50 million   | <input type="checkbox"/> \$1,000,000,001 to \$10 billion  |
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| <input type="checkbox"/> \$500,001 to \$1 million          | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> More than \$50 billion           |

Part 3: Request for Relief, Declaration, and Signatures

**WARNING** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

/s/ Michael Gillman  
Managing Member, authorized representative of ASTA Therapy Services, LLC

12/28/2015  
MM/DD/YYYY

18. Signature of Attorney

/s/ Frank J. Kokoszka

Attorney for Debtor(s)

12/28/2015

MM/DD/YYYY

**Frank J. Kokoszka**

Printed name

**Kokoszka & Janczur, P.C.**

Firm name

**122 South Michigan Avenue**

Number Street

**Suite 1070**

**Chicago IL 60603**

City, State, ZIP Code

**312-429-7861**

Contact phone

**6201436**

Bar number

**fkokoszka@k-jlaw.com**

Email address

**Fill in this information to identify the case:**

Debtor ASTA Therapy Services, LLC  
United States Bankruptcy Court for the Northern District of Illinois  
Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)
- ☐ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- ☐ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- ☐ Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- ☐ Schedule H: Codebtors (Official Form 206H)
- ☐ Summary of Assets and Liabilities for Non-Individuals (Official Form 206 - Summary)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☒ Other document that requires a declaration **Statement of Corporate Ownership, Verification of Creditor Matrix**

I declare under penalty of perjury that the foregoing is true and correct.

/s/ Michael Gillman  
Signature of individual signing on behalf of debtor

12/28/2015  
MM / DD / YYYY

Michael Gillman  
Printed name

Managing Member  
Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor ASTA Therapy Services, LLC  
United States Bankruptcy Court for the Northern District of Illinois  
Case number \_\_\_\_\_  
(If known)

Check if this is:  
☐ An amended filing  
☐ A supplement disclosing additional payments or agreements as of

**Form BKA-2030**

**Disclosure of Compensation of Attorney for Debtor**

12/15

Use this procedural form, if desired, to disclose the matters enumerated in 11 U.S.C. § 329 and Fed. R. Bankr. P. 2016(b).

Disclosure is required within 14 days after the order for relief or another time as the court may direct. A supplemental disclosure is required within 14 days after any payment or agreement not previously disclosed.

Attach a copy of the retainer agreement, if any.

**Part 1: Compensation**

For legal services, I have agreed to accept..... **\$2,165.00**

Prior to the filing of this statement I have received  
Retainer for legal services..... **\$2,165.00**

Retainer for expenses, including the court filing fee .....

Balance Due ..... **\$0.00**

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) **We R Counseling (Michael Gillman)**

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify) ☒ N/A

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

**Part 2: Services**

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy.
- Preparation and filing of any petition, schedules, statement of affairs and plan that may be required.
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof.
- ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters.~~
- e.

f.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Adversary Proceedings and Motions to Avoid Liens**

7. A copy of my retainer agreement ☐ is ☒ is not attached.

**Part 3: Certification**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

/s/ Frank J. Kokoszka

Frank J. Kokoszka (Kokoszka & Janczur, P.C.)

12/28/2015

Date

**KOKOSZKA & JANCZUR, P.C.**

ATTORNEYS AT LAW

122 SOUTH MICHIGAN AVENUE  
SUITE 1070  
CHICAGO, ILLINOIS 60603-6270

FRANK J. KOKOSZKA  
JOHN L. JANCZUR

MARK D. LISTON  
OF COUNSEL  
EDWARD JANCZUR

PHONE: (312) 443-9600  
FAX: (312) 443-6704

WEBSITE: [www.k-jlaw.com](http://www.k-jlaw.com)

December 3, 2015

**Via E-Mail & Personal Delivery**

ASTA Therapy Company  
c/o Dr. Michael Gillman

**Re: Terms of Retention as Attorney (Bankruptcy)**

Dear Dr. Gillman:

As we discussed, it is this firm's standard practice to have a retention letter agreement with new clients and/or new engagements (the "Engagement Agreement"). This Engagement Agreement is also required by the local rules for the U.S. Bankruptcy Court for the Northern District of Illinois, and may also be required under the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005 (the "BAPCPA"). This Engagement Agreement will set forth the terms of our firm's representation of ASTA Therapy Company in a chapter 7 bankruptcy case. You should carefully read the rest of this letter and countersign the enclosed copy of it. Please feel free to call me if you have any questions but be sure that any clarification you get is incorporated in this letter before you countersign it. This will avoid any misunderstandings. This law firm will not do any work on your behalf until I receive a retainer and a signed Engagement Agreement.

**Nature of Engagement.** This Engagement Agreement is between Kokoszka & Janczur, P.C., (an Illinois Professional Corporation, engaged in the practice of law and possibly a Debt Relief Agency as currently defined under the U.S. Bankruptcy Code) and ASTA Therapy Company ("Client"). The nature of this representation is to represent ASTA Therapy Company in its bankruptcy case. My fee for a Chapter 7 case of this nature will be a total of \$2,500.00 which includes the filing fee of \$335.00. As additional facts are presented, the fees we charge may be subject to change. My fee includes the following standard services:

- Analysis of Client's financial condition;
- Advising Client as to the advisability and/or eligibility of seeking relief in bankruptcy under chapter 7, 11 or chapter 13 of the Bankruptcy Code;
- Assisting the Client in assembling documents necessary for or in connection with the filing of a Bankruptcy Petition;



ASTA Therapy Company  
c/o Dr. Michael Gillman  
December 3, 2015  
Page 2 of 4

- Advising Client to availability of personal exemptions under applicable law;
- Assisting Client in meeting all conditions precedent to making a petition for relief under the Bankruptcy Code and in meeting all conditions precedent to obtaining a discharge, if Client is eligible to receive a discharge;
- Preparing Client for examination at meeting of creditors pursuant to Section 341 of the Bankruptcy Code;
- Assisting the Client in the enforcement of the automatic stay, if required;
- Communication with the Client's bankruptcy trustee, as necessary.
- Communication with the Client's creditors, as necessary.

If our firm does work on your behalf and you then decide not to file for bankruptcy or to not have our firm represent you in the bankruptcy filings, I will charge you at my usual hourly rate of \$350.00 per hour for any work done.

**Retainer & Fees.** The entire fee (\$2,500.00) must be paid before we file the bankruptcy case.

**Additional Services.** If your case becomes more complex, requiring anything beside what is listed above under "Nature of Engagement", I will require an additional fee for additional services. Client agrees to pay for legal services beyond "Standard Services" at the prevailing hourly rates of the attorneys of Kokoszka & Janczur, P.C. For example, if creditors file an objection or other action such as a request for a Rule 2004 exam and attendance at an exam or if the trustee attempts to liquidate any property, then I will most likely represent you at my usual hourly rate, which is currently \$350.00 per hour. My hourly rate is subject to change upon thirty (30) days written notice. Please note that our firm's representation of you in a bankruptcy case does not include, inter alia, "cleaning-up" your credit report, post-bankruptcy.

**Results.** In the course of every matter, clients ask me for my advice and ask me to predict the likelihood of success and failure. I will give you the benefit of my honest judgment based on my experience. No lawyer can predict the outcome of every case. To the extent that I make predictions to help you evaluate your alternatives, you must understand that they are guesses based on my experience and not guarantees.

**Your Duties.** It is vital that you disclose all debts and all assets, any transfers of property or payments made to creditors within ninety days of the bankruptcy filing and any transfers of property made to creditors who are insiders within one year of the bankruptcy filing, plus all other information required in the bankruptcy petition, bankruptcy schedules and statement of financial affairs. If you provide any false or intentionally incomplete information, the bankruptcy

ASTA Therapy Company  
c/o Dr. Michael Gillman  
December 3, 2015  
Page 3 of 4

case may be dismissed and/or you may be prosecuted under criminal law for bankruptcy fraud. Your bankruptcy case is subject to audit by the U.S. Trustee's Office and other federal agencies and offices. If you do provide false and/or intentionally incomplete information, I will withdraw as your attorney.

When the bankruptcy petition is filed, an automatic stay will go into effect. The automatic stay generally prohibits creditors from taking any action to collect their claims outside of the Bankruptcy Court. For example, if the automatic stay is in effect creditors are not allowed to sue ASTA Therapy Company, or to foreclose upon or repossess any of property without obtaining permission from the bankruptcy court. It is essential, of course, that I be notified of any threatened lawsuits, foreclosures, or repossessions, as well as all pending lawsuits or other actions so that we can make sure that the creditors and their attorneys are notified and the action stopped. In most cases liens on property will not be wiped out by the bankruptcy. If you have any concern as to specific debts or liens, please contact me.

**Termination and Withdrawal.** You have the right to terminate my services at any time. Please keep in mind that if you terminate my services after the bankruptcy case is filed, I will have to file a motion to withdraw and seek permission of the Court to withdraw. If you terminate my services you will still owe me my full fee (plus any additional fees earned) and reimbursement of my expenses to the date of termination. I also have the right to withdraw from representing you at any time, subject to applicable ethical and procedural rules.

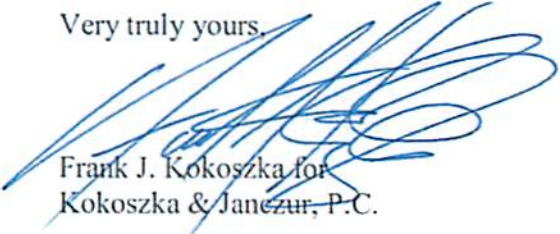
**Client Cooperation and Communication.** In order to represent you, it is absolutely essential that I be able to reach you and that you cooperate with the preparation for any proceedings. Please notify me in writing immediately of any new addresses or telephone numbers.

While I pride myself on the attention that I give to my clients' matters, please know that there will be many times when I will be difficult to reach because I am in court, out of the office at a meeting or on the phone concerning another client's or possibly your case. If you call my office and I am not available, please let my assistant or the receptionist who takes the call know the reason for the call and any information (be as specific as possible) that will allow me to pertain to your matters as quickly as I can. You can also leave a confidential message on our voice-mail system. I can also be reached at my e-mail address: [fkokoszka@k-jlaw.com](mailto:fkokoszka@k-jlaw.com).

ASTA Therapy Company  
c/o Dr. Michael Gillman  
December 3, 2015  
Page 4 of 4

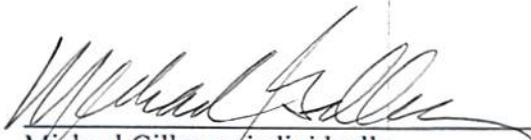
Please countersign this letter below to show your agreement to these terms and return the countersigned copy to me. Upon receipt of a signed retention agreement and payment of the initial retainer, I will begin to work on your case. If you have any questions or concerns, please feel free to call me. I look forward to working with you. Thank you.

Very truly yours,



Frank J. Kokoszka for  
Kokoszka & Janeczur, P.C.

**APPROVED AND AGREED:**



Michael Gillman, individually  
and as agent of ASTA Therapy Company

\_\_\_\_\_  
Date

**THE BANKRUPTCY CODE REQUIRES US TO EXPLICITLY AND  
CONSPICUOUSLY INFORM YOU THAT:**

**"WE ARE A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY  
RELIEF UNDER THE BANKRUPTCY CODE."**

**United States Bankruptcy Court  
Northern District of Illinois  
Chicago Division**

In re: **ASTA Therapy Services, LLC**

Case No.

**VERIFICATION OF CREDITOR MATRIX**

I(we) verify that the attached list of creditors and the matrix file to be uploaded in this case are true and complete to the best of my(our) knowledge.

/s/ Michael Gillman

Michael Gillman  
Managing Member of ASTA Therapy Services, LLC

12/28/2015

Date

Altus Global Trade Solutions  
2400 Veterans Memorial Blvd.  
Kenner, LA 70062

Fitzsimmons Home Medical Services  
PO Box 497  
Oak Forest, IL 60452

Internal Revenue Service  
c/o T. Atkinson  
2001 Butterfield Road  
Downers Grove, IL 60515

Jackson Therapy Partners  
c/o Greenberg, Grant & Richard, Inc.  
5858 Westheimer Road, Suite 500  
Houston, TX 77057

**United States Bankruptcy Court  
Northern District of Illinois**

In re: **ASTA Therapy Services, LLC**

Case No.

Chapter **7**

**STATEMENT OF CORPORATE OWNERSHIP**

Pursuant to Fed. R. Bankr. P. 1007(a)(1), the Debtor declares as follows:

- ☐ The debtor is a corporation that is a governmental unit and is therefore not required to provide a statement of ownership.
- ☒ No corporation, other than a governmental unit, directly or indirectly owns 10% or more of any class of the debtor's equity interests:
- ☐ The following is a list of every corporation, other than a governmental unit, that directly or indirectly owns 10% or more of any class of the debtor's equity interests:

I, the Managing Member of the above named Debtor, declare under penalty of perjury that I have read the foregoing Statement of Corporate Ownership and that it is true and correct to the best of my information and belief.

/s/ Michael Gillman  
Managing Member

12/28/2015  
Date

Debtor ASTA Therapy Services, LLC

Case number:

**11. Why is the case filed in this district?**

Check all that apply:

- ☐ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☒ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention.

**Part 2:**

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000 - 5,000   | <input type="checkbox"/> 25,001 - 50,000   |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001 - 10,000  | <input type="checkbox"/> 50,001 - 100,000  |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001 - 25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**15. Estimated assets**

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> \$0 to \$50,000 | <input type="checkbox"/> \$1,000,001 to \$10 million    | <input type="checkbox"/> \$500,000,001 to \$1 billion     |
| <input type="checkbox"/> \$50,001 to \$100,000      | <input type="checkbox"/> \$10,000,001 to \$50 million   | <input type="checkbox"/> \$1,000,000,001 to \$10 billion  |
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**16. Estimated liabilities**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> \$0 to \$50,000                   | <input type="checkbox"/> \$1,000,001 to \$10 million    | <input type="checkbox"/> \$500,000,001 to \$1 billion     |
| <input type="checkbox"/> \$50,001 to \$100,000             | <input type="checkbox"/> \$10,000,001 to \$50 million   | <input type="checkbox"/> \$1,000,000,001 to \$10 billion  |
| <input checked="" type="checkbox"/> \$100,001 to \$500,000 | <input type="checkbox"/> \$50,000,001, to \$100 million | <input type="checkbox"/> \$10,000,000,001 to \$50 billion |
| <input type="checkbox"/> \$500,001 to \$1 million          | <input type="checkbox"/> \$100,000,001 to \$500 million | <input type="checkbox"/> More than \$50 billion           |

**Part 3:**

**Request for Relief, Declaration, and Signatures**

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**17. Declaration and signature of authorized representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

/s/ Michael Gillman  
Managing Member, authorized representative of ASTA Therapy Services, LLC

12/28/2015

MM/DD/YYYY

**Fill in this information to identify the case:**

Debtor ASTA Therapy Services, LLC  
United States Bankruptcy Court for the Northern District of Illinois  
Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 12/15

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**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ Schedule A/B: Assets--Real and Personal Property (Official Form 206A/B)
- ☐ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
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- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☒ Other document that requires a declaration **Statement of Corporate Ownership, Verification of Creditor Matrix**

I declare under penalty of perjury that the foregoing is true and correct.

/s/ Michael Gillman   
Signature of individual signing on behalf of debtor

12/28/2015  
MM / DD / YYYY

Michael Gillman  
Printed name

Managing Member  
Position or relationship to debtor



Debtor ASTA Therapy Services, LLC

Case number:

f.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Adversary Proceedings and Motions to Avoid Liens**

7. A copy of my retainer agreement ☐ is ☒ is not attached.

**Part 3: Certification**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy case.

/s/ Frank J. Kokoszka

Frank J. Kokoszka (Kokoszka & Janczur, P.C.)

12/28/2015

Date

**United States Bankruptcy Court  
Northern District of Illinois  
Chicago Division**

In re: **ASTA Therapy Services, LLC**

Case No.

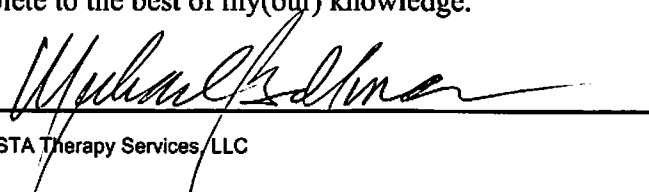
**VERIFICATION OF CREDITOR MATRIX**

I(we) verify that the attached list of creditors and the matrix file to be uploaded in this case are true and complete to the best of my(our) knowledge.

/s/ Michael Gillman

Michael Gillman

Managing Member of ASTA Therapy Services, LLC



12/28/2015

Date

**United States Bankruptcy Court  
Northern District of Illinois**

In re: **ASTA Therapy Services, LLC**

Case No.

Chapter 7

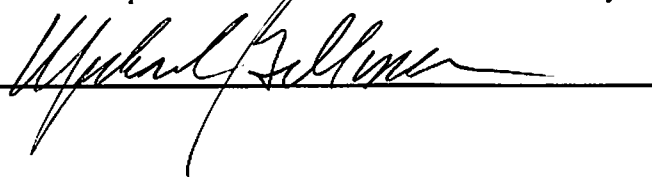
**STATEMENT OF CORPORATE OWNERSHIP**

Pursuant to Fed. R. Bankr. P. 1007(a)(1), the Debtor declares as follows:

- ☐ The debtor is a corporation that is a governmental unit and is therefore not required to provide a statement of ownership.
- ☒ No corporation, other than a governmental unit, directly or indirectly owns 10% or more of any class of the debtor's equity interests:
- ☐ The following is a list of every corporation, other than a governmental unit, that directly or indirectly owns 10% or more of any class of the debtor's equity interests:

I, the Managing Member of the above named Debtor, declare under penalty of perjury that I have read the foregoing Statement of Corporate Ownership and that it is true and correct to the best of my information and belief.

/s/ Michael Gillman  
Managing Member



12/28/2015  
Date